Case 16-14019 Doc 1 Fill in this information to identify your case:	Filed 04/25/16	Entered 04/25/16 14:43:38 age 1 of 71	Desc Main
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)			
Case number (if known)	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13		Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Mitchell	
		First name	First name
	Write the name that is on	E	
	your government-issued picture identification (for	Middle name	Middle name
	example, your driver's	Carbin	
	license or passport	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last	First name	First name
	8 years		
	Include your married or	Middle name	Middle name
	maiden names.		
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social	XXX - XX- <u>6660</u>	xxx - xx-
	Security number or	OR	OR
	federal Individual	9 xx - xx-	9 xx - xx-
	Taxpayer		
	Identification number (ITIN)		

Entered 04/25/16 /14/43:38 Desc Main Mitchel Case 16-14019 EDoc 1 Filed 04&25/16 Debtor 1 Page 2 of 71 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 1525 W Morse Ave garden Number Street Number Street 60626 Chicago Illinois City State Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Tell the Court About Your Bankruptcy Case Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District ____ When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

this bankruptcy petition.

Mitchel Case 16-14019 EDoc 1 Filed 04&25/16 Entered 04/25/16 114:43:38 Desc Main Debtor 1 Page 4 of 71 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

State

City

Zip Code

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Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5:

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 2 (Spouse Only in a Joint Case):

About Debtor 1: You must check one: ✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of: I have a mental illness or a mental Incapacity. deficiency that makes me incapable of realizing or making rational decisions about finances. Disability. My physical disability causes me to be

You must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of: Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about

credit counseling, you must file a motion for waiver of credit

counseling with the court.

credit counseling, you must file a motion for waiver of credit counseling with the court.

military combat zone.

If you believe you are not required to receive a briefing about

Active duty.

unable to participate in a briefing in

internet, even after I reasonably tried to

I am currently on active military duty in a

person, by phone, or through the

Mitchel Case 16-14019 EDoc 1 Page 6 of 71 **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded ✓ No. and administrative ٦ Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Mitchell Carbin Signature of Debtor 2 Signature of Debtor 1 Executed on 4/25/2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1

Debtor 1 Mitchel Case 16-14019 EDOC 1 Filed 04/25/16 Entered 04/25/16 (1):44:43:38 Desc Main

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

X

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

orrect.				
/s/ Elizabeth Placek Signature of Attorney for Debtor		Date	4/25/2016 MM / DD / Y	
Elizabeth Placek				
Printed name				
Semrad Law Firm				
Firm name				
20 S. Clark Street				
Street				
28th Floor				
Chicago	Illinois			60603
City	State			Zip Code
Contact phone		Em	ail address	eplacek@semradlaw.com
Bar number		Sta	te	

Case 16-14019 Doc 1 Filed 04/25/16 Entered 04/25/16 14:43:38 Desc Main Fill in this information to identify your case: Debtor 1 Mitchell Carbin First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$15,807.34 1b. Copy line 62, Total personal property, from Schedule A/B \$15,807.34 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)

5. Schedule J: Your Expenses (Official Form 106J)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F......

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....

Copy your combined monthly income from line 12 of Schedule I.....

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$13,593.00

\$10.725.00

\$24,318.00

\$2,364.23

\$2,350.00

Your total liabilities

\$0.00

12/15

Mitchel Case 16-14019 EDoc 1 Debtor 1 Page 9 of 71 **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Vour debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$2,205.20 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$0.00
9g. Total. Add lines 9a through 9f.	\$0.00

	Case 16-14019		Filed 04/25/16	Entered 04/25/16	14:43:38 Des	c Main
Fill in this	information to identify your case:					
Debtor 1	Mitchell	E	Carbir	ı		
	First Name	Middle	Name Last N	ame		
Debtor 2						
(Spouse,	if filing) First Name	Middle	Name Last N	ame		
United St	ates Bankruptcy Court for the:	Northern	District of III	inois		
			(5	State)		
Case nun (If known)	nber					
(Check if this is an
Officia	al Form 106A/B					amended filing
Saha	dula A/P. Pranci	v4.,				404
	dule A/B: Propel tegory, separately list and desc					12/1
esponsib rrite your Part 1:	where you think it fits best. Be ble for supplying correct inform name and case number (if kno Describe Each Residenc u own or have any legal or equ	nation. If more sown). Answer ev ce, Building,	space is needed, attach a very question. Land, or Other Real	a separate sheet to this form I Estate You Own or Ha	. On the top of any add	
✓	No. Go to Part 2					
▤	Yes. Where is the property?					
_			What is the property	? Check all that apply.		claims or exemptions. Put
1.1	Street address, if available, or o	ther description	Single-family home			ed claims on Schedule D: aims Secured by Property.
	Street address, if available, or o	urier description	Duplex or multi-unit	· ·		, ,
			_ Condominium or co	•	Current value of the entire property?	Current value of the portion you own?
			Manufactured or mo	obile home		
	Number Street		_ Land	,	Describe the nature of	f vour ownership
			Investment property Timeshare		interest (such as fee s	imple, tenancy by
	City State	Zip Code	Other		the entireties, or a life	estate), if known.
	•	·	ш			
				in the property? Check one.	Check if this is co	mmunity property
			Debtor 1 only Debtor 2 only		(ecce dee.,	
			Debtor 1 and Debto	or 2 only		
			At least one of the d	•		
			_	u wish to add about this item	ı, such as local	
If you	own or have more than one, list he	ere:				
4.0			What is the property			claims or exemptions. Put ed claims on <i>Schedule D:</i>
1.2	Street address, if available, or o	ther description	Single-family home			aims Secured by Property.
			Duplex or multi-unit	ŭ	Current value of the	Current value of the
			Manufactured or mo	•	entire property?	portion you own?
			Land	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		 -
	Number Street		Investment property		Describe the nature of	your ownership
			Timeshare		interest (such as fee s the entireties, or a life	
	City State	Zip Code	Other			
			Who has an interest i	in the property? Check one.	Chack if this is co	mmunity property
			Debtor 1 only	pporty i oriookorio.	(see instructions)	
			Debtor 2 only		_	
			Debtor 1 and Debto	or 2 only		
			At least one of the d	ebtors and another		
			Other information you property identificatio	u wish to add about this item n number:	, such as local	

Debtor 1	Mitchel Case 16-140	19 EDOC 1	Filed 04/25/16 Entered 04/25/16	(1 1 k4kk43: <u>38 De</u>	esc Main
1.3Stree	et address, if available, or oth	w	DocumerName Page 11 of 71 /hat is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secu	I claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
Nun		Zip Code	Manufactured or mobile home Land Investment property Timeshare Other	Describe the nature interest (such as fee the entireties, or a life	simple, tenancy by
			The has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ther information you wish to add about this item, s	(see instructions	community property s)
you ha		ion you own for all o	roperty identification number:		
Do you ov you own th 3. Cars, va	vn, lease, or have legal or e at someone else drives. If you ns, trucks, tractors, sport utili	quitable interest in a lease a vehicle, also r	any vehicles, whether they are registered or not? In report it on Schedule G: Executory Contracts and Unexpes		
	Make Model: Year: Approximate mileage: Other information: Current Vehicle	GMC Terrain 2010 78000	Who has an interest in the property? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	the amount of any sec	d claims or exemptions. Put ured claims on <i>Schedule D:</i> Claims Secured by Property. Current value of the portion you own? §13850.00
3.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	the amount of any sec	d claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?

Debtor 1	Mitchel Case 16-14019 EDoc 1 First Name Middle Name	Filed 04/25/16 Entered 04/25/16 Document Page 12 of 71	ada4i43: <u>38 Desc Main</u>
3.3	Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
4 Wa t Exa		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) mer recreational vehicles, other vehicles, and accessories ft, fishing vessels, snowmobiles, motorcycle accessories	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
4.1	Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
	Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
		all of your entries from Part 2, including any entries for the state of the state o	1 \$13030.00

Debtor 1 Mitchel Case 16-14019 EDOC 1 Filed 04/2/5//16 Entered 04/2/5//16 (14.443:38 Desc Main Pirst Name Document Plane Page 13 of 71

P	art 3: Describe Y	our Personal and Household Items	
D	o you own or ha	eve any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
(6. Household goods	and furnishings	
	Examples: Major app	liances, furniture, linens, china, kitchenware	
	No		
$\overline{\mathbf{Z}}$	Yes. Describe	Used Furniture	\$450.00
7	7. Electronics Evamples: Televisions	s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
Н	No	s and radios, addio, video, stereo, and digital equipment, computers, printers, scarners, music	
H	_	(2) Lepton (4) TV	1
⊻	Yes. Describe	(2) Laptop (1) TV	\$550.00
	stamp, coi	ue and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; in, or baseball card collections; other collections, memorabilia, collectibles	
$ \leq $			
L	Yes. Describe		
۱,	9. Equipment for spo	arts and hobbies	1
	Examples: Sports, ph	otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes s; carpentry tools; musical instruments	
~	.	o, carponary costs, madical mediamente	
Ě	Yes. Describe		1
۲	Tes. Describe		
_	•	es, shotguns, ammunition, and related equipment	
\leq			1
L	Yes. Describe		
	1	clothes, furs, leather coats, designer wear, shoes, accessories]
	•		
,	12. Jewelry Examples: Everyday je gold, silve	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
$\overline{\mathbf{V}}$	No No		
	Yes. Describe		
,	13. Non-farm animals Examples: Dogs, cats		
✓	No		
Ē	Yes. Describe		<u> </u>
	14. Any other person No	al and household items you did not already list, including any health aids you did not list	
F	Yes. Describe		
	- 46 Add the deller ::-	lue of all of very autice from Day 2 including any autice for none way have all all	
		lue of all of your entries from Part 3, including any entries for pages you have attached number here▶	\$1000.00

Describe Your Financial Assets Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes 17.1. Checking account: TCF Checking account \$130.00 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No Institution or issuer name: Yes 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about

them

Mitchel Case 16-14019 EDOC 1 Filed 04/25/16 Entered 04/25/16 (144)43:38 Desc Main Document Page 15 of 71 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Yes. Give specific information about Issuer name: them.... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Type of account: Institution name: Yes. List each \$102.34 401K account separately. 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ∏ No Institution name: ✓ Yes.... \$725.00 Security Deposit-Landlord Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **✓** No Issuer name and description: Yes....

Debt	or 1	Mitchel Ca	ase :	16-14019	EDoc 1			<u>Entered</u> 04/25/114 Page 16 of 71	6 (144443: <u>38</u>	Desc Main
24.				cation IRA, in 1), 529A(b), ar		a qualified ABLE	progran	n, or under a qualified stat	e tuition program.	
		No Yes	Institu	tion name and	description. Sep	parately file the reco	ords of ar	ny interests.11 U.S.C. § 521(d	5):	_
25.		rcisable fo	or you		sts in property	(other than anyth	ning list	ed in line 1), and rights or	powers	
26.	Еха		/rights ernet do			and other intellec				
27.		enses, fraı	nchise Iding po		general intangil ve licenses, coo		n holdinç	gs, liquor licenses, professior	nal licenses	
Mor	iey (or prope	erty o	wed to you	1?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	✓	about you a	specific t them, already	information including whet filed the returns					Federal: State: Local:	
29.	Exar	nily suppor nples: Past No		· lump sum alim	nony, spousal su	oport, child support,	, mainter	nance, divorce settlement, pro		
	Ħ		specific	information					Alimony: Maintenance: Support: Divorce settlement Property settlement	
30.	Exar	<i>nples:</i> Unpa	aid waq ial Seci	-	nsurance payme	nts, disability benef made to someone o		oay, vacation pay, workers' cor	mpensation,	

Debt	or 1	Mitchel Case 16 First Name	6-14019	EDoc 1 Middle Name		4 <u>¢25/16</u> mëtht ^{me}	Entere Page 1		16 A443: <u>38</u>	Des	<u>c Main</u>
31.		rests in insurance mples: Health, disabi		rance; health			· ·		r's insurance		
		No Yes. Name the insura of each policy and lis		,	Company nan	ne:			Beneficiary:		Surrender or refund value:
32.	If you	interest in property u are the beneficiary erty because someon No Yes. Describe	of a living trus				policy, or are o	currently entitle	d to receive	—	
33.	Exar	ms against third pa mples: Accidents, em No					ade a demai	nd for payme	nt		
34.	Othe to se	Yes. Describe er contingent and one off claims No Yes. Describe	unliquidated	claims of ev	very nature, i	ncluding co	unterclaims	of the debtor	and rights		
35.	✓	financial assets yo No Yes. Describe	u did not alre	ady list							
36.		the dollar value of Part 4. Write that nu	-					-			\$957.34
Part	5:	Describe Any B	susiness-R	elated Pro	perty You	Own or H	ave an Into	erest In. Lis	st any real estat	e in P	art 1.
37.	Do y	ou own or have an	ıy legal or eqi	uitable intere	est in any bu	siness-relate	d property?				
		No. Go to Part 6. Yes. Go to line 38.								po i Do	rrent value of the rtion you own? not deduct secured claims exemptions
38.	✓	ounts receivable or No Yes. Describe	commission	s you alread	y earned						
39.	Exar	ce equipment, furn nples: Business-rela No Yes. Describe			odems, printe	ers, copiers, fa	x machines, r	rugs, telephone	es, desks, chairs, elect	tronic de	evices

		Mitchel Case 16 First Name		Middle Name	Filed 04/25/16 Document	Page 18 of 71	16 (11 14 443: <u>38</u> D	esc Main	
40.	Mac	hinery, fixtures, eq	uipment, sup	oplies you us	se in business, and tools	of your trade			
	✓	No							
		Yes. Describe							
41.	Inve	entory							
	V	No							
	=	Yes. Describe						<u> </u>	
42.	Inte	rests in partnershi	ps or ioint v	entures					
	✓		, , .						
					Name of entity:		% of ownership:		
		Yes. Give specific information about							
		them							
43. C	Custo	omer lists, mailing	lists, or othe	r compilatio	ns				
	✓	No							
		Yes. Do your lists ind	clude persona	ılly identifiable	information (as defined in	11 U.S.C. § 101(41A))?			
		□ No							
		∐ No	iho						
		Yes. Descri	ibe					-	
44.	Any	business-related p	roperty you	did not alrea	dy list				
	V	No							
	=	Yes. Give specific							
		information							
			-			s for pages you have attach			
0									
Part	6:	Describe Any F If you own or have an	arm- and interest in far	Commerci mland, list it in	al Fishing-Related F Part 1.	Property You Own or H	lave an Interest In	•	
46.	Doy	you own or have ar	ny legal or ed	quitable inter	rest in any farm- or comm	nercial fishing-related prop	erty?		
	✓	No. Go to Part 7.							alue of the
	П	Yes. Go to line 47.						portion yo	uct secured
								claims	
								or exemption	ins
47.		m animals <i>mples:</i> Livestock, pou	ıltrı/ farm-raic	ed fish					
			any, iaiiii-ialo	ou 11311					
		No						1	
	П	Yes. Describe							

Deb	tor 1	Mitchel Case 16-14019 First Name	EDoc 1 Middle Name		Entered 04/25/116 /114:43:38 Page 19 of 71	Desc	Main
48.	Cro	ps-either growing or harveste	d	Boodinone	. ago 10 0 1		
	✓	No					
		Yes. Describe				_	
49.	Farı	m and fishing equipment, impl	ements, machi	nery, fixtures, and tools	of trade		
	✓	No					
		Yes. Describe					
50.	Farı	m and fishing supplies, chemic	cals, and feed				
	✓	No					
		Yes. Describe					
51.	Any	farm- and commercial fishing	related propert	y you did not already lis	st		
	✓	No					
		Yes. Describe					
		e dollar value of all of your end Write that number here					
						L	
Part					nat You Did Not List Above		
53.		you have other property of any mples: Season tickets, country clul		ot already list?			
	✓	No					
		Yes. Give specific					
		information					
54. A	dd th	e dollar value of all of vour ent	ries from Part 7	7. Write that number her	e	▶	
Part	8:	List the Totals of Each P	art of this Fo	orm			
55. F	Part 1	: Total real estate, line 2			>		
56. p	oart 2	total vehicles, line 5		\$13850.0	0		
57. P	art 3:	: Total personal and household	d items, line 15				
58. P	art 4:	: Total financial assets, line 36		\$957.34			
59. F	Part 5	: Total business-related prope	erty, line 45	·			
60. F	Part 6	: Total farm- and fishing-relate	ed property, line	= 52			
61. F	Part 7	: Total other property not liste	d, line 54				
62. 1	Γotal	personal property. Add lines 56	through 61	\$15807.3	4		+ \$15807.34
				4.5501.0	Copy personal property t	otal >	
							\$15807.34
63. T	otal c	of all property on Schedule A/E	3. Add line 55 + li	ine 62			

E.II .	. (1		oc 1 Filed 04/	25/16	Entered 04/2	5/16 14:43:38	Desc Main
	n this information	ation to identify your case: Mitchell	E	Carbir	<u>.</u>		
Dec	itor i	First Name	Middle Name	Last N			
	otor 2 ouse, if filing)	First Name	Middle Name	Last N	Jame		
		nkruptcy Court for the: Northe		istrict of III	linois		
	e number nown)			3)	State)		
Of	ficial F	orm 106C				1	Check if this is a amended filing
Sc	hedule	C: The Propert	y You Claim	as Ex	kempt		12/1
For is to exer	each item o state a s mpted up eive certa mption of perty is d lie ldent Which set You ar	pecific dollar amount as to the amount of any ap in benefits, and tax-exen	s exempt, you muse exempt. Alternative plicable statutory on the retirement function and the samount, your exempt as Exempt g? Check one only, even ankruptcy exemptions. 11 U.S.C. § 522(b)(2)	st specification with the state of the state	fy the amount of may claim the forme exemptions to be unlimited in the exemption to would be limited ouse is filing with you. 22(b)(3)	ull fair market value —such as those for dollar amount. How a particular dollar a to the applicable s	r health aids, rights to wever, if you claim an amount and the value of the
		ription of the property and line ale A/B that lists this property	Current value of the portion you own		of the exemption yo	·	cific laws that allow exemption
			Copy the value from Schedule A/B				
	Brief description	Current Vehicle	\$13,850.00	V	4057.00		735 ILCS 5/12-1001(c)
	Line from Schedule A	/B: <u>03</u>			\$257.00 % of fair market value, u icable statutory limit		
	Brief	TOT OL sell'en service	\$130.00		·		735 ILCS 5/12-1001(b)
	description Line from	TCF Checking account	\$130.00	<u> </u>	\$130.00	-	
	Schedule A	/B: <u>17</u>			% of fair market value, on the statutory limit	up to any	
3.	•	aiming a homestead exemption adjustment on 4/01/19 and every		es filed on o	ŕ	,	

Debtor 1 Mitchel Case 16-14019 EDoc 1 Filed 04t25t/16 Entered 04t25t/16 (144:43:38 Desc Main Document Page 21 of 71 Part 2: Additional Page

-	ion of the property and line A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description:	Used Furniture	\$450.00	\$450.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	06		100% of fair market value, up to any applicable statutory limit	
Brief description:	(2) Laptop (1) TV	\$550.00	\$550.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	07		100% of fair market value, up to any applicable statutory limit	_
Brief description:	401K	\$102.34	7	735 ILCS 5/12-704
Line from			\$102.34	_
Schedule A/B:	21		applicable statutory limit	
Brief description:	Security Deposit- Landlord	\$725.00	\$725.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	22		100% of fair market value, up to any applicable statutory limit	_

		Case 16-14019	Doc 1 Filed	04/25/16 Entered	0 <i>4/25/</i> 16 1 <i>4·4</i> 3·3	8 Desc Main	
Fill	in this informa	ation to identify your case:	1717.		J 4 (2.5) 10 14.45.5	o best main	
Del	otor 1	Mitchell First Name	E Middle Name	Carbin Last Name	_		
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name	_		
Uni	ted States Ba	nkruptcy Court for the: N	lorthern	District of Illinois (State)	_		
	se number nown)						
Of	ficial F	orm 106D					heck if this is a nended filing
Sc	chedu	le D: Credito	rs Who Ha	ve Claims Sec	ured by Prop	perty	12/1
cor forn 1.	Do any creed No. Ch	mation. If more space top of any additional ditors have claims secured seck this box and submit this f Il in all of the information belo	e is needed, copy to pages, write your d by your property? form to the court with you	rried people are filing to the Additional Page, fill name and case number ur other schedules. You have noth	it out, number the e r (if known).	ntries, and attach it	
		All Secured Claims	more then one consumed	alaim list the areditor concretely	y for each Column A	Column B	Column C
2.	claim. If mor		rticular claim, list the oth	claim, list the creditor separately er creditors in Part 2. As much a ditor's name.		value of collateral that supports this	Unsecured portion
2.1	Creditor's Na	T BANK AND TRUS me ERSON HWY STE D	Describe the propert	ty that secures the claim:	\$13,593.00	\$13,850.00	\$0.00
	Number	Street	Current Vehicle Value As of the date you file	ie: \$13,850.00 le, the claim is: Check all that a	oply.		
	HARAHAN City	Louisiana 70123 State ZIP Code	Contingent Unliquidated				
	Who owes Debtor	the debt? Check one. 1 only	Disputed Nature of lien. Check	call that apply			
	Debtor 2	2 only 1 and Debtor 2 only		u made (such as mortgage or se	cured		
		one of the debtors and		ch as tax lien, mechanic's lien)			
		if this claim relates to a ınity debt	Judgment lien from Other (including a				
		vas incurred <u>6/1/2015</u>	Last 4 digits of acco	,			

	Case 16-14019	Doc 1 Filed	04/25/16	Entered 04	<u>1/2</u> 5/16 14:43:38	B Desc	Main	
Fill in this infor	mation to identify your case): 		go _ • •.				
Debtor 1	Mitchell	E	Carbin		_			
	First Name	Middle Name	Last Na	ame				
Debtor 2 (Spouse, if filin	g) First Name	Middle Name	Last Na	ame	-			
United States I	Bankruptcy Court for the:	Northern	District of Illi	nois tate)	-			
Case number (If known)					-			
Official F	orm 106E/F					Chec	k if this is an	amended filing
Schedi	ule E/F: Cre	ditors Who I	Have Ui	nsecure	d Claims			12/15
106Å/B) and or are listed in <i>Sc</i> the boxes on t	n Schedule G: Executory chedule D: Creditors Who he left. Attach the Contir	expired leases that could re or Contracts and Unexpired or Hold Claims Secured by nuation Page to this page. 'Y Unsecured Claims	d Leases (Officia / Property. If mo	I Form 106G). Do re space is need	not include any credito ed, copy the Part you no	ors with partia eed, fill it out	ally secured , number th	d claims that e entries in
	reditors have priority una Go to Part 2.	secured claims against yo	ou?					
identify w possible, Part 1. If	hat type of claim it is. If a cla list the claims in alphabetic more than one creditor hold	claims. If a creditor has mo aim has both priority and non al order according to the cre ds a particular claim, list the claim, see the instructions for	npriority amounts, editor's name. If yo other creditors in	list that claim here ou have more than Part 3.	and show both priority an two priority unsecured cla	d nonpriority a	mounts. As r	much as
						Total claim	Priority amount	Nonpriority amount

Mitchel Case 16-14019 EDoc 1 Filed 04625/16 Entered 04/25/16 (144)43:38 Desc Main Debtor 1 Documernt Page 24 of 71 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 AMERASSIST AR SOLUTION \$81.00 Last 4 digits of account number 7221 Nonpriority Creditor's Name 445 Hutchinson Ave #500 When was the debt incurred? 4/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent Columbus Ohio 43235 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt 001 Collection; Collecting for ORIGINAL Is the claim subject to offset? **~** CREDITOR: MEDICAL PAYMENT **✓** No Other, Specify DATA Yes 4.2 Americash \$2,300.00 Last 4 digits of account number Nonpriority Creditor's Name 555 Torrence Avenue When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 60409 Calumet City Illinois Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify Payday loan **✓** No Yes \$738.00 9850 Last 4 digits of account number Nonpriority Creditor's Name 501 Greene Street # 302 When was the debt incurred? 5/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent Augusta Georgia 30901 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Collection; Collecting for ORIGINAL Is the claim subject to offset? **V** CREDITOR: 10 PEOPLES GAS LIGHT **✓** No

Yes

Other. Specify

AND COKE 266

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

ган	2. Tour NONF KIOKITT Offsecured Claims - Continu	auton rage	
	After listing any entries on this page, number them beginning w	vith 4.5, followed by 4.6, and so forth.	Total claim
4.4	DVRA BILLING Nonpriority Creditor's Name	Last 4 digits of account number A042	\$555.00
	2701 LOKER AV WEST	When was the debt incurred? 3/1/2016	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	CARLSBAD California 92008	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	··	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify 12 InstallmentLoan	
	✓ No	_	
	Yes		
4.5	EAGLE ACNTS	Last 4 digits of account number 8491	\$196.00
	Nonpriority Creditor's Name 7510 Old Madison Ave	When was the debt incurred? 3/1/2014	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Indianapolis Indiana 46227	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	片	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt Is the claim subject to offset?	✓ 001 Collection; Collecting for ORIGINAL	
	No	CREDITOR: 04 LAGRANGE COUNTY	
	Yes	Other. Specify CLERK	
46	ILLINOIS COLLECTION SE		\$55.00
4.0	Nonpriority Creditor's Name	Last 4 digits of account number 7975	φ33.00
	8231 185TH ST STE 100 Number Street	When was the debt incurred? 8/1/2015	
	Trained Strott	As of the date you file, the claim is: Check all that apply.	
	TINILEY DADY Illinois 60497	Contingent	
	TINLEY PARK Illinois 60487 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL PAYMENT	
	✓ No	Other. Specify DATA	
	I I Yes		

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning w	vith 4.5, followed by 4.6, and so forth.	Total claim
4.7	Illinois Department of Employment Security	Last 4 digits of account number	\$3,000.00
	Nonpriority Creditor's Name 33 S State St	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply. Contingent	
	Chicago Illinois 60603		
	City State Zip Code Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify back pay unemployment	
	✓ No		
	Yes		
4.8	MERCHANTS CREDIT GUIDE	Last 4 digits of account number 0009	\$124.00
	Nonpriority Creditor's Name 223 W JACKSON BLVD # 700	When was the debt incurred? 7/1/2015	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Chicago Illinois 60606	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	001 Collection; Collecting for ORIGINAL	
	✓ No	CREDITOR: MEDICAL PAYMENT	
	Yes	Other. Specify DATA	
4.9	NATLCRSYS	Last A digita of account number 5507	\$1,705.00
	Nonpriority Creditor's Name P.O. BOX 312125	Last 4 digits of account number 5537	<u> </u>
	Number Street	When was the debt incurred?9/1/2009	
		As of the date you file, the claim is: Check all that apply.	
	ATLANTA Georgia 31131	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	H	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Lack if this claim relates to a community debt Is the claim subject to offset?	Collection; Collecting for ORIGINAL	
	No	Other. Specify CREDITOR: 09 HAMPTON OAKS	
	☐ Yes		

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.10	PLS Financial Services, Inc.	Last 4 digits of account number	\$800.00
	Nonpriority Creditor's Name One South Wacker Drive, 36th Floor	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	ChicagoIllinois60606CityStateZip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify Payday loan	
	✓ No	_	
	Yes		
4.11	S C ELECTRIC & GAS Nonpriority Creditor's Name	Last 4 digits of account number 0670	\$171.00
	<u>l-26</u>	When was the debt incurred? 12/1/2008	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	COLUMBIA South Carolina 29218 City State Zip Code	— Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify InstallmentLoan	
	✓ No	_	
	Yes		
4.12	University of Chicago Medicine Nonpriority Creditor's Name	Last 4 digits of account number	\$1,000.00
	15965 Collections Center Dr	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	ChicagoIllinois60693CityStateZip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	H	you did not report as priority claims	
	Check if this claim relates to a community debt Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Medical Bill	
	No	V Galot. Opcolly Wiedical bill	
	Yes		

Debtor 1 Mitchel Case 16-14019 EDOC 1 Filed 04/25/16 Entered 04/25/16 14:43:38 Desc Main First Name Document Page 28 of 71

Part 3: List Others to Be Notified About a Debt That You Already Listed

5.	collection agency is to agency here. Similarly,	rying to collect fro	om you for a debt you than one creditor for	our bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a owe to someone else, list the original creditor in Parts 1 or 2, then list the collection any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you in Parts 1 or 2, do not fill out or submit this page.
	Peoples Gas Name			On which entry in Part 1 or Part 2 did you list the original creditor?
	200 E. Randolph			Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
	Chicago	Illinois	60601	Last 4 digits of account number 9850
	City	State	Zip Code	

Debtor 1 Mitchel Case 16-14019 EDoc 1 Filed 04625/16 Entered 04/25/16 (Au4):43:38 Desc Main
First Name Document Plane Page 29 of 71

Part 4: Add the Amounts for Each Type of Unsecured Claim

		nts of certain types of unsecured claims. This information is for each type of unsecured claim.	sta	ntistical reporting purposes only. 2	8 U.S.C. §159.
				Total claims	
Total claims from Part 1	6a.	Domestic support obligations.	6a.	\$0.00	
	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00	
	6e.	Total. Add lines 6a through 6d.	6e.	\$0.00	
				Total claims	
Total claims from Part 2	6f.	Student loans	6f.	\$0.00	
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$10,725.00	
	6j.	Total. Add lines 6f through 6i.	6j.	\$10,725.00	

Fill in this info			1/25/16 Entered	1.04/25/16 14:43:38	Desc Main
	· · ·		Ordin		
Debtor 1					
Dobtor 2	i iist ivailie	Middle Name	Lastivanie		
	ng) First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	Northern	District of Illinois		
			(State)		
Case number					
(II Idiowii)					Charletthia is a
Official	Form 106G				amended filing
Schedu	Enter 1 Mitchell E Carbin First Name Middle Name Last Name Enter 2 Prouse, if filling) First Name Middle Name Last Name Enter States Bankruptcy Court for the: Northern District of Illinois (State) State Name Check if this is a manneded filling or manneded filling or manneded filling or manneded filling as enumber known) Check if this is an amended filling to see the court with your other entries, and attach it to this page. On the top of any additional pages, write your name and see number (if known). Do you have any executory contracts or unexpired leases? No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B). List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases. Person or company with whom you have the contract or lease State what the contract or lease is for				
space is need	ed, copy the additional page				
1. Do vou	have anv executory c	ontracts or unexpired	leases?		
☐ No. Cl	heck this box and file this forn	n with the court with your other	schedules. You have nothin	ng else to report on this form.	
✓ Yes. F	ill in all of the information belo	ow even if the contracts or lea	ses are listed on Schedule	A/B: Property (Official Form 106A	/B).
Perso	on or company with whom	you have the contract or lea	ase	State what the contrac	t or lease is for
2.1 Gen Re	ealty			,	
Name				•	

1525 W. Morse Ave Number

Chicago City Street

Illinois State 60626 Zip Code

		Case 16-1401	0 Doc 1 Filad C	14/25/16 Entared	04/25/16 14:43:38	Dose Main
Fill i	n this inform	ation to identify your cas	e:	94/7.3/10 IIIEIEU	<u>11472</u> 3/10 14.43.30	Desc Main
Deb	tor 1	Mitchell	E	Carbin		
Dob	tor 2	First Name	Middle Name	Last Name		
		First Name	Middle Name	Last Name	_	
Unite	ed States Ba	ankruptcy Court for the:	Northern	District of Illinois		
Cas	e number		_	(State)		
	iown)	-				_
						Check if this is a amended filing
Off	ficial F	orm 106H				ŭ
		e H: Your Co	ndehtors			12/1:
				vou may have. Re as compl	ete and accurate as possible. I	
in the	boxes on question.	the left. Attach the Add		n the top of any Additional	Pages, write your name and c	e, fill it out, and number the entries ase number (if known). Answer
	✓ No Yes	cury oddesions. (ii ye	are mining a joint base, do not	tilot officer apoddo do d oodob	ion.	
	Louisiana, N No. Go	levada, New Mexico, Puo o to line 3. id your spouse, former sp	lived in a community proper erto Rico, Texas, Washington, pouse, or legal equivalent live v	and Wisconsin.)	nunity property states and territori	ies include Arizona, California, Idaho,
	Y	es. In which community s	state or territory did you live? _	Fill in the	e name and current address of the	at person.
		Name of your spouse, for	ormer spouse, or legal equival	ent	<u> </u>	
		Number Street			<u> </u>	
		Number Street				
		City	State	Zip Code	_	
	as a codeb	tor only if that person	is a guarantor or cosigner. I	Make sure you have listed t		the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> blumn 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Debtor 1 Mitchell E Carbin First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Defficial Form 106 Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, nclude information about your spouse. If you are sparated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional	Fill in th	nis information to identify	your case:			5/16 14	:43:38	Desc M	ain	
Pebtor 2 Check if this is: An armended filing A supplement showing post-petition chapter: expenses as of the following date: Check if this is: An armended filing A supplement showing post-petition chapter: expenses as of the following date: Case number (if known) District of Illinois (State) A supplement showing post-petition chapter: expenses as of the following date: MM / DD / YYYYY			Docur		yc 32 01	-				
Debtor 2 (Spouse, if filling) First Name	Debtor 1									
(Spouse, if filing) First Name	Debtor 2	T not reamo	Wildaio Harrio	<u> Laot Hamo</u>			Check if this	s is:		
Official Form 106l Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, notude information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Describe Employed there? Amonths Describe Employed Sold Washington Divd Not Employed Not Employed		if filing) First Name	Middle Name	Last Name			An ame	nded filing		
Case number (If known) Official Form 106 Schedule I: Your Income Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, no not include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Employment status Employed Debtor 1	United Sta	ates Bankruptcy Court for the:	Northern							
Difficial Form 106 Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, noclude information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Employment status Employed Debtor 1	Case num	nber		(State)					_	
Se as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, noclude information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Employer's address Part 1: Debtor 1 Debtor 2 Employed Debtor 2 Employed Not Employed	(If known)						MM / D	D/YYYY		
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, not locked information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment I. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Debtor 1 Debtor 2 Employed Debtor 2 Employed Debtor 2 Employed Debtor 2 Manager Debtor 2 Manager Debtor 3 Not Employed Debtor 4 Not Employed Debtor 4 Not Employed Debtor 5 Not Employed Debtor 6 Not Employed Debtor 9 No	Officia	al Form 106l								
11. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's address Manager Employer's name Sodexo, Inc. Employer's name Employer's address Manager Employer's name Sodexo, Inc. Employer's address Manager Employer's name Sodexo, Inc. Employer's address Gaithersburg Maryland 20878 City State Zip Code How long employed there?	3che	dule I: Your Inc	ome							12 <i>/</i> *
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employers status Employed	nclude nformat pages, v	information about you tion about your spouse vrite your name and ca	r spouse. If you are sep e. If more space is neede se number (if known). A	arated and yed, attach a se	our spouse eparate sh	e is not filin	g with yo	u, do not	inclu	de
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employment status ✓ Employed ✓ Not Em	1.	, , ,		Debtor 1			Debtor 2	2		
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's address Sodexo, Inc. Sodexo, Inc. Employer's address 9801 Washington Dlvd Number Street SDH Education West LLC Gaithersburg Maryland 20878 City State Zip Code How long employed there? Amonths Not Employed Number Street SDH Education West LLC City State Zip Code		information.	Employment status	Employed			□ Emplo	wod		
attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's address 9801 Washington Dlvd Number Street SDH Education West LLC Gaithersburg Maryland 20878 City State Zip Code 4 months Manager City State Zip Code				=	, d			-		
information about additional employers. Employer's name Employer's address Number Street Number Street Number Street Number Street Number Street Endown Street Address City State Zip Code Amonths Employed there's Employed there's Amonths Employed there's Amonths Employed there's Amonths Empl				I Not Employe	ŧu		III NOLEI	прюуец		
Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address 9801 Washington Dlvd Number Street SDH Education West LLC Gaithersburg Maryland 20878 City State Zip Code How long employed there? 4 months Final Dlvd Number Street SDH Education West LLC City State Zip Code		information about additional	Occupation	Manager	Manager					
or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? SOH Education West LLC SOH Education West LLC		employers.	Employer's name	Sodexo, Inc.						
or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Number Street SDH Education West LLC Gaithersburg Maryland 20878 City State Zip Code 4 months Number Street Number Street Number Street City State Zip Code		Include part time, seasonal,	Employer's address	9801 Washingto	n Dlvd					
Occupation may include student or homemaker, if it applies. Gaithersburg Maryland 20878 City State Zip Code How long employed there? 4 months City State Zip Code							Number Str	eet		
student or homemaker, if it applies. Gaithersburg Maryland 20878 City State Zip Code How long employed there? 4 months City State Zip Code				SDH Education	West LLC					
or homemaker, if it applies. Gaithersburg Maryland 20878 City State Zip Code How long employed there? 4 months Gaithersburg Maryland 20878 — City State Zip Code — — — — — — — — — — — — — — — — — — —		•								
How long employed there? 4 months				Gaithersburg	Maryland	20878	City	S	tate	Zip Code
4 monuts				City	State	Zip Code				
Day 21 Cive Details About Monthly Income			How long employed there?	4 months						
	Part 2	Give Details About I	Monthly Income							
			date you file this form. If you ha	ave nothing to repo	ort for any line,	write \$0 in the s	pace. Includ	le your non-filii	ng spo	use unless you
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.			re than one employer, combine th	ne information for a	all employers fo	or that person on	the lines be	low. If you nee	ed more	space, attach
					For D	ebtor 1				
are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach						\$1,461.60			_	
are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse	3. Est	timate and list monthly overt	ime pay.	3	· <u></u>	+ \$0.00			_	
are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.	4. Cal	Iculate gross income. Add line	e 2 + line 3.	4		\$1,461.60				

Debtor 1 Mitchell Case 16-14019 E Doc 1 Filed 04/25/16 Entered @4125/116 14:43:38 Desc Main Documentame Page 33 of 71 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$1,461.60 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$166.08 5b. Mandatory contributions for retirement plans 5b. \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$14.62 5e. Insurance 5e. \$0.00 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. -\$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$180.70 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$1,280.90 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 8a. monthly net income. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. -\$1,083.33 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$1,083.33 10. Calculate monthly income. Add line 7 + line 9. 10. \$2,364.23 \$2,364.23 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$2,364.23 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain:

Debtor 1 Mitchell Case 16-14019 E Doc 1 Filed 04/25/16 Entered 04/25/16 14:43:38 Desc Main
First Name Middle Name Documentame Page 34 of 71

Part 1: Describe Employment

	Debtor 1			Debtor 2		
Employment status	✓ EmployedNot Employed			Employed Not Employed		
Occupation						
Employer's name	Uber					
Employer's address	1000 Right Here Number Street			Number Street		
How long employed there?	Kennesaw City 6 months	Georgia State	30152 Zip Code	City	State	Zip Code

Debtor 1 Mitchell Case 16-14019 E Doc 1 Filed 04/25/16 Entered 04/25/16 14:43:38 Desc Main
First Name Middle Name Documentame Page 35 of 71

Part 2: Give Details About Monthly Income

	For Debtor 1	For Debtor 2 or non-filing spouse
8h.Other monthly income. Specify:		
1. Uber	\$1,083.33	

Official Form 106l Schedule I: Your Income page 4

	Case 16-1401		14/25/16 Entered 04/2	5/16 14:43:38	Desc Maiı	n
Fill in this inforr	nation to identify your case	ə:	J			
Debtor 1	Mitchell	Е	Carbin			
	First Name	Middle Name	Last Name			
Debtor 2				Check if this is:		
(Spouse, if filing	j) First Name	Middle Name	Last Name	An amended filing	j	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	A supplement sho		on chapter 13
Case number			(Ciaio)	, , , , , , , , , , , , , , , , , , , ,	3	
(If known)			.	MM / DD / YYYY		
	Form 106J le J: Your Ex	penses				12/15
nformation. If I	-		e filing together, both are equally i form. On the top of any additional		-	ber
Part 1: Des	cribe Your Househo	old				
1. Is this a joir	nt case?					
✓ No. Go	to line 2					
Yes. Do	oes Debtor 2 live in a se	parate household?				
	No					
	_					
L	Yes. Debtor 2 must file	Official Forms 106J-2, Expen	ses for Separate Household of Debto	r 2.		
2. Do you hav	e dependents? 🔽 N	0				
Do not list D Debtor 2.		es. Fill out this information for ach dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does depen with you?	dent live
	•					
Part 2: Estin	nate Your Ongoing	Monthly Expenses				
-	of a date after the bankr	* . * *	you are using this form as a suppl plemental Schedule J, check the			
		ash government assistance on Schedule I: Your Income			Yo	our expenses
	or home ownership exp r the ground or lot. 4.	enses for your residence. In	clude first mortgage payments and		4.	\$825.00
If not incl	uded in line 4:				••	
4a. Real es					4a	\$0.00
4b. Proper	ty, homeowner's, or renter	's insurance				
·					4b.	\$0.00
4c. Home r	maintenance, repair, and u _l	okeep expenses			4c.	\$0.00

\$0.00

4d.

4d. Homeowner's association or condominium dues

Debtor 1 Mitchel Case 16-14019 EDoc 1 Filed 04/25/16 Entered 04/25/16 (144:43:38 Desc Main

Document Page 37 of 71 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$225.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$160.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$250.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$80.00 9. 10. Personal care products and services \$45.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$260.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$182.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$323.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Debtor 1	Mitchel Case First Name	<u>e 16-14019</u>	EDOC 1 Middle Name	Filed 04£25/16 Document	Entered 04/6 Page 38 of 72		Desc Main	
21.Other	Specify:			Document	Page 30 UI 7.	21		\$0.00
	ılate your mont	• •						\$2,350.00
	dd lines 4 throu	o .						\$0.00
	. ,		,,	ny, from Official Form 106	J-2			\$2,350.00
22c. A	dd line 22a and	22b. The result is y	our monthly ex	kpenses.		22.		
23. Calcu	late your mont	hly net income.						
23a. C	Copy line 12 (you	r combined month	ly income) from	n Schedule I.		23a	_	\$2,364.23
23b. C	Copy your monthl	y expenses from lir	ne 22 above.			23b		\$2,350.00
	•	nthly expenses from r monthly net incor		income.		23c	_	\$14.23
0.4 D		,						
24. Do yo	ou expect an in	crease or decrea	se in your exp	penses within the year a	tter you file this form?			
				r loan within the year or do of a modification to the ter				
✓ 1	No							
	⁄es							
	Explair	n here:						

page 3

	Case 16-1401	9 Doc 1 Filed 0	1/25/16 Entorc	<u>d 04/2</u> 5/16 14:43:38	Doce Main
Fill in this inforn	nation to identify your case		4/7.3/10 1 HIETE	1104/25/10 14.45.50	Desc Main
Debtor 1	Mitchell First Name	E Middle Name	Carbin Last Name		
Debtor 2 (Spouse, if filing		Middle Name	Last Name		
	ankruptcy Court for the:	Northern	District of Illinois (State)		
Case number (If known)					_
Official I	Form 106De	С			Check if this is a amended filing
Declarat	ion About a	_ n Individual De	btor's Sched	ules	12/1
f two married p	eople are filing togethe	r, both are equally responsi	ble for supplying correc	t information.	
Part 1: Sign Did you pa	Below	eone who is NOT an attorney	· 		rs, or both. 18 U.S.C. §§ 152, 1341,
✓ No ☐ Yes. I	Name of person		Attach Bankruptcy Signature (Official	r Petition Preparer's Notice, Declard Form 119).	ation, and
•	nalty of perjury, I declare are true and correct.	e that I have read the summa	ary and schedules filed w	rith this declaration and	
/s/ Mitche	ell Carbin		×		
Signature o	of Debtor 1		Signatu	re of Debtor 2	
Date <u>4/25/</u>	2016 (DD/YYYY		Date	MM/DD/YYYY	

	Case 16-14 nis information to identify your		Filed 04/25/16	Entered 04/25/16 14:43:3	8 Desc Main
Debtor	1 Mitchell	E	Carbin		
Debtor	First Name	Middle	Name Last Nar	ne	
(Spouse	e, if filing) First Name	Middle	Name Last Nar	ne	
United:	States Bankruptcy Court for the	ne: Northern	District of Illing		
Case no					
Offic	cial Form 107				Check if this is a amended filing
State	ement of Finai	ncial Affairs	for Individua	Is Filing for Bankru	otcy 12/1
				, both are equally responsible for sup	
	- -				nber (if known). Answer every questior
Part 1:	Give Details About Y	our Marital Status	s and Where You Live	ed Before	
1. \	What is your current marita	al status?			
[[Married ✓ Not married				
2. [During the last 3 years, hav	e you lived anywhere	other than where you live	now?	
]	✓ No Yes. List all of the places	you lived in the last 3 ye	ars. Do not include where yo	u live now.	
	Debtor 1:		Dates Debtor 1 lived	Debtor 2:	Dates Debtor 2 lived
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1	Dates Debtor 2 lived there Same as Debtor 1
			there	Same as Debtor 1	there Same as Debtor 1
	Debtor 1: Number Street				there
			there From	Same as Debtor 1	there Same as Debtor 1 From
		Zip Code	there From	Same as Debtor 1 Number Street City State Zi	there Same as Debtor 1 From To Code
	Number Street	Zip Code	there From	Same as Debtor 1 Number Street	there Same as Debtor 1 From To
	Number Street	Zip Code	there From	Same as Debtor 1 Number Street City State Zi	there Same as Debtor 1 From To Code
	Number Street City State	Zip Code	there From To	Same as Debtor 1 Number Street City State Zi Same as Debtor 1	there Same as Debtor 1 From To Code Same as Debtor 1
	Number Street City State		there	Same as Debtor 1 Number Street City State Zi Same as Debtor 1 Number Street	there Same as Debtor 1 From To Cocode Same as Debtor 1 From From From From From

Debtor 1 Mitchel Case 16-14019 EDoc 1
First Name Middle Name

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Part	12: Explain the Sources of Your Inc	ome				
4.	Did you have any income from employment Fill in the total amount of income you received f activities. If you are filing a joint case and you have the property of the property	rom all jobs and all businesses	including part-time			
		Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
	From January 1 of current year until the date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$13192.80	Wages, commissions, bonuses, tips Operating a business		
	For last calendar year: (January 1 to December 31, 2015) YYYY	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$2961.60	☐ Wages, commissions, bonuses, tips☐ Operating a business		
	For the calendar year before that: (January 1 to December 31, 2014) YYYYY	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$23000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business		
	Did you receive any other income during this Include income regardless of whether that income benefit payments; pensions; rental income; intereand you have income that you received together, List each source and the gross income from each	ne is taxable. Examples of other est; dividends; money collected list it only once under Debtor 1.	income are alimony; child su from lawsuits; royalties; and	gambling and lottery winnings.	, ,	
	No Yes. Fill in the details.					
		Debtor 1		Debtor 2		
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	
	From January 1 of current year until the date you filed for bankruptcy:					
	For last calendar year: (January 1 to December 31,2015)					
	For the calendar year before that: (January 1 to December 31,					

Debtor 1 Mitchel Case 16-14019 EDoc 1
First Name Middle Name

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Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

Are eith	er Debtor 1's o	r Debtor 2's d	ebts primarily con	sumer debts?							
No.			r 2 has primarily c ehold purpose."	onsumer debts. Consu	umer debts are defined in 11	U.S.C. § 101(8) as "incurre	ed by an individual primarily				
	During the 90 o	days before you	ı filed for bankruptcy,	η, did you pay any creditor a total of \$6,425* or more?							
	No. Go to	line 7.									
	Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.										
	* Subject to ad	justment on 4/0	1/19 and every 3 year	ars after that for cases file	ed on or after the date of adj	ustment.					
✓ Yes.	Debtor 1 or D	ebtor 2 or bot	th have primarily o	onsumer debts.							
	During the 90 o	days before you	ı filed for bankruptcy,	did you pay any creditor	a total of \$600 or more?						
	✓ No. Go to	line 7.									
	that	creditor. Do no	ot include payments		e and the total amount you p ligations, such as child supp nkruptcy case.						
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for				
Cre	editor's Name				-	-	Mortgage				
Nu	ımber Street						Car Credit card				
	- Otroct						Loan repayment				
							Suppliers or				
Cit	У	State	Zip Code				vendors Other				
	editor's Name					-	Mortgage				
Cre	editor's Name						Car				
Nu	ımber Street						Credit card				
							Loan repayment Suppliers or				
Cit	у	State	Zip Code				vendors				
							Other				
Cre	editor's Name				-	-	Mortgage				
Nu	ımber Street						Car Credit card				
							Loan repayment				
							Suppliers or				
Cit	У	State	Zip Code				vendors				

Mitchel Case 16-14019 EDoc 1 Filed 04625/16 Entered 04/25/16 (144:43:38 Desc Main Debtor 1 Document Page 43 of 71 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 Mitchel Case 16-14019 EDoc 1
First Name Middle Name

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Part 4: Identify Legal Actions, Repossessions, and Foreclosures

	such matters, includ	filed for bankruptcy, wing personal injury cases						tody modifications,	and contract
✓ N	lo es. Fill in the details.								
			Nature o	of the case	Court or age	ncy		Status of the ca	se
	Case title							Pending	
					Court Name			On appeal	
	Case number				Number Stree	t		Concluded	
					City	State	Zip Code	•	
	Case title							Pending	
					Court Name			· =	
	Case number				Courtivanie			On appeal	
					Number Stree	t		Concluded	
					City	State	Zip Code	•	
ä	Yes. Fill in the inform Creditor's Name Number Street	ation below.		Describe the proper			Date	Value of t property	he
				Property was repo	ossessed.				
				Property was fore					
				Property was gar					
	City	State Zip Co	ode	Property was atta	ched, seized, or l	evied.			
				Describe the proper	ty		Date	Value of t property	he
	Creditor's Name								
	Number Street			Explain what happe	ned				
	number Street			Property was repo	necessed				
				Property was fore					
				Property was gar					
	City	State Zip Co	ode	Property was atta		evied.			
	,	p 0		_ · ′	•				

Deb	tor 1		<u>d 04¢25/16 Entered</u>	38 Desc	<u>Main</u>
11.		nin 90 days before you filed for bankruptcy, did any counts or refuse to make a payment because you owe	creditor, including a bank or financial institution, set of	ff any amounts fi	om your
		No Yes. Fill in the details.			
			Describe the action the creditor took	Date action was taken	Amount
		Creditor's Name			
		Number Street		1	
			Last 4 digits of account number: XXXX-		
		City State Zip Code			
12.		in 1 year before you filed for bankruptcy, was any of iver, a custodian, or another official?	your property in the possession of an assignee for th	e benefit of credi	itors, a court-appointed
	✓	No Yes			
Part	5:	List Certain Gifts and Contributions			
13.	Wit	thin 2 years before you filed for bankruptcy, did you	give any gifts with a total value of more than \$600 per	person?	
		No Yes. Fill in the details for each gift.			
		Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Person to Whom You Gave the Gift			
		Number Street			
		City State Zip Code Person's relationship to you			
		Person to Whom You Gave the Gift			
		Number Street			
		City State Zip Code Person's relationship to you			
		. dice. to totalion on p to you		<u>l</u>	

		First Name	IVIIQ	Do Do	ocument Page 46 of 71		
14.	With	nin 2 years before you	u filed for ban		give any gifts or contributions with a total value of mor	re than \$600 to an	y charity?
	✓	No Yes. Fill in the details f	for each gift or	contribution.			
		Gifts with a total val per person	ue of more th	an \$600	Describe the gifts	Dates you gave the gifts	Value
		Charity's Name					
		Number Street					
		•	State	Zip Code			
Part 15.		List Certain Loss		runtov or since v	ou filed for bankruptcy, did you lose anything because	of theft fire other	r diagram or
13.		bling?	illeu ioi baliki	ruptcy or since yo	ou filed for bankruptcy, did you lose anything because	or men, me, ome	i disaster, or
		No Yes. Fill in the details.					
		Describe the propert		d	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
					Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .		
Part	7:	List Certain Paym	ents or Tra	nsfers			
16.		in 1 year before you i			anyone else acting on your behalf pay or transfer any	property to anyor	ne you consulted about
	_		ruptcy petition p	preparers, or credit	counseling agencies for services required in your bankrupto	cy.	
		No Yes. Fill in the details.					
					Description and value of any property transferred	Date payment or transfer was made	Amount of payment
		Semrad Law Firm			Attorney's Fee - 0.00	4/25/2016	\$0.00
		Person Who Was Paid					
		20 South Clark Street	28th Floor				
		Number Street					
		Chicago	Illinois	60606			
			State	Zip Code			
		Email or website address					
		Person Who Made the	Payment, if No	ot You		<u> </u> 	
		Person Who Was Paid	d				
		Number Street					
		City	State	Zip Code			
		Email or website addre	ess				
		Person Who Made the	Payment, if No	ot You			

Debtor 1 Mitchel Case 16-14019 EDOC 1 Filed 04/25/16 Entered 04/25/16 (14.4):43:38 Desc Main

Deb	otor 1	Mitchel Case 16-14019 First Name			Entered 04/26 Page 47 of 71	ih16 (144;43)	38 Desc	<u>Main</u>	
17.	you	nin 1 year before you filed for book deal with your creditors or to mot include any payment or transfer	nake payments to you	r creditors?	ng on your behalf pay o	or transfer any p	property to anyor	ne who p	promised to help
	✓	No Yes. Fill in the details.							
				Description and	d value of any property	transferred	Date payment or transfer was made	Amoui	nt of payment
		Person Who Was Paid							
		Number Street							
		City State	Zip Code						
18.	ordi: Inclu	hin 2 years before you filed for I nary course of your business of ide both outright transfers and transfers that you have already listed on No Yes. Fill in the details.	or financial affairs? Insfers made as security					-	
		Too. I ill ill tile detaile.		Description and property transfe			property or paymebts paid in exch		Date transfer was made
		Person Who Received Transfer							
		Number Street	•						
		City State Person's relationship to you	Zip Code						
		Person Who Received Transfer							
		Number Street							
		City State Person's relationship to you	Zip Code						
19.		nin 10 years before you filed for ese are often called asset-protection		transfer any prop	perty to a self-settled tru	ıst or similar de	evice of which yo	u are a l	peneficiary?
		Yes. Fill in the details.							
				Description an	d value of the property	transferred			Date transfer was made
		Name of trust							

Debtor 1 Mitchel Case 16-14019 EDoc 1
First Name Middle Name Filed 04¢25/16 Entered 04/25/16 11.4:43:38 Desc Main Document Page 48 of 71

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

	or tra	in 1 year before you filed for bansferred? de checking, savings, money mar eratives, associations, and other	ket, or other financ	cial accounts				·	
		No Yes. Fill in the details.							
	_			Last 4	digits of account er	Type of instrum	account or nent	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Person Who Was Paid		— XXXX-			ecking vings		
		Number Street					ney market okerage ner		
		City State	Zip Code						
		Person Who Was Paid		XXXX-			ecking vings		
		Number Street		<u> </u>		Bro	ney market okerage		
		City State	Zip Code			Oth	er		
	valua	ou now have, or did you have wables? No Yes. Fill in the details.	vithin 1 year befo		I for bankruptcy, a	ny safe deposi	it box or other deposito		cash, or other
									have it?
		Name of Financial Institution		Name					☐ No ☐ Yes
		Number Street		Number	Street				100
				City	State	Zip Code			
12	Llove	City State	Zip Code	other then	vour homo within	1 voor before v	you filed for bonkrupton		
22.	✓	e you stored property in a stora No Yes. Fill in the details.	ge unit or place	other than	your nome within	i year before y	ой піей тог рапкгиртсу	· •	
				Who else	had access to it?		Describe the content	s	Do you still have it?
		Name of Storage Facility		Name					☐ No
		Number Street		Number	Street				Yes
				City	State	Zip Code			
		City State	Zip Code						

Deb	tor 1	First Name Middle Name	Filed 04¢2 Docume	init ^{me} Paç	ntered 04/2 ge 49 of 71	Б /1.6 / 1.43:38 Desc Mair	1
Part	9:	Identify Property You Hold or Contro	I for Someo	ne Else			
23.	Do y	vou hold or control any property that someone No Yes. Fill in the details.	e else owns? Ir	nclude any pro	perty you borro	wed from, are storing for, or hold in tru	st for someone.
	_		Where is the	e property?		Describe the contents	Value
		Owner's Name	Number Stre	eet		-	
		Number Street	_ ,			-	
			City	State	Zip Code	-	
		City State Zip Code	_				
Part	10:	Give Details About Environmental In	nformation				
For	the p	urpose of Part 10, the following definitions apply:					
	ha in	nvironmental law means any federal, state, or local azardous or toxic substances, wastes, or material in cluding statutes or regulations controlling the clean ite means any location, facility, or property as define	nto the air, land, nup of these sub	soil, surface wa ostances, waste	ater, groundwater, es, or material.	or other medium,	
		used to own, operate, or utilize it, including dispos	•	nonnona law,	whether you now	own, operate, or dunze it	
		azardous material means anything an environment xic substance, hazardous material, pollutant, conta			raste, hazardous s	substance,	
Rep	oort al	I notices, releases, and proceedings that you know	v about, regardle	ss of when they	occurred.		
24.	Has	any governmental unit notified you that you r	mav be liable o	r potentially lia	able under or in	violation of an environmental law?	
		No	,	,			
	Ц	Yes. Fill in the details.	Governmen	tal unit		Environmental law, if you know it	Date of notice
		Name of site		1		-	
		Name of site	Governmenta			_	
		Number Street	Number Stre	eet			
			City	State	Zip Code	-	
		City State Zip Code	_				
25.	Hav	e you notified any governmental unit of any re	elease of hazar	dous material	?		
	<u> </u>	No Yes. Fill in the details.					
	ш	res. Fill III the details.	Governmen	tal unit		Environmental law, if you know it	Date of notice
		Name of site	Governmenta	al unit		-	
		Number Street	Number Stre	et		-	
			City	State	Zip Code	-	
		City State Zip Code	_				

Debt	or 1	Mitchel Case 16-140 First Name	019 EDoc 1 Middle Name	Filed 04¢25/16 Documetht The	Entered 04/25 Page 50 of 71	h16612443: <u>38</u>	Desc Main
26.	Hav	e you been a party in any	judicial or administra	tive proceeding under	any environmental law	? Include settlements	and orders.
		No Silling to the sil					
	Ш	Yes. Fill in the details.		Court or agency		Nature of the case	Status of the
		Coop title		G J			case
		Case title		Court Name			Pending
							On appeal
		Case number		Number Street			Concluded
				City State	e Zip Code		
Part	11:	Give Details About Y	our Business or	Connections to An	y Business		
27.	With	nin 4 years before you filed	d for bankruptcy, did	you own a business or	have any of the follow	ing connections to an	y business?
		A sole proprietor or sel	f-employed in a trade, _l	orofession, or other activit	ty, either full-time or part-	-time	
				or limited liability partner	ship (LLP)		
		A partner in a partners An officer, director, or r		a corporation			
				securities of a corporation	on		
	✓	No. None of the above applie	es. Go to Part 12.				
		Yes. Check all that apply about	ove and fill in the details				
				Describe the nat	ture of the business		entification number Do not all Security number or ITIN.
		Business Name				EIN:	
		Number Street		Name of accour	tant or bookkeeper	Dates busine	existed
		City State	Zip Code			From	To
				Describe the na	ture of the business		entification number Do not al Security number or ITIN.
		D. Charles March				EIN:	
		Business Name					
		Number Street		Name of accour	tant or bookkeeper	Dates busine	ess existed
		City State	zip Code			From	То
				Describe the na	ture of the business	Employer Ide	entification number Do not
							al Security number or ITIN.
		Business Name				EIN:	
		Number Street				Dates busine	ess existed
		-		Name of accour	tant or bookkeeper	From:	To
		City State	e Zip Code			From	10
		City State	e Zip Code			From	То

Debto	or 1 <u>I</u>	Mitchel Case	<u> 16-14019</u>		iled 04&25/16		04/25/16/1k4v43: <u>38</u>	Desc Main	
	ı	First Name		Middle Name	Document Militage	Page 51 (of 71		
		in 2 years befo tors, or other p	•	bankruptcy, did yo	ou give a financial sta	tement to any	one about your business? Ir	nclude all financial institutions,	
I		No Yes. Fill in the de	tails below						
					Date issued				
		Name			MM/DD/YYYY				
		Number Stre	et						
		City	State	Zip Code					
Part 1	12:	Sign Below							
aı	nd co	orrect. I unders uptcy case can	tand that makiı	ng a false stateme up to \$250,000, or	ent, concealing prope	rty, or obtainin	I declare under penalty of penalty of penalty of penalty or property by frau both. 18 U.S.C. §§ 152, 1341,		
		Sigr	nature of Debtor	1			Signature of Debtor 2		
		Dat	e 4/25/2016				Date		
D	id yo	ou attach additi	onal pages to	Your Statement of	Financial Affairs for	Individuals Fi	ling for Bankruptcy (Official	Form 107)?	
•	Z N	0							
	Ye	es							
D	id yo	ou pay or agree	to nav someon	o who is not an at	ttorney to help you fil				
<u> </u>			to pay someon	ie who is not an a		out bankrupt	cy forms?		
	Z N			ie who is not an a		i out bankrupt			
		o es. Name of pers		ie who is not an a		i out bankrupt	cy forms? Attach the Bankruptcy Petitio. Declaration, and Signature (C	•	

	Case 16-1401	9 Doc 1 Filed (04/25/16 E	Entered 04/25/16 14:43:38	Desc Main
Fill in this information	ation to identify your case		14/7:1/11	0	DC3C Main
Debtor 1	Mitchell	E	Carbin		
Debtor 2	First Name	Middle Name	Last Name	e	
(Spouse, if filing)	First Name	Middle Name	Last Name	e	
United States Ba	inkruptcy Court for the:	Northern	District of Illinoi		
Case number (If known)			(State	<u> </u>	
,	orm 108				Check if this is an amended filing
Stateme	nt of Intenti	on for Individu	uals Filing	g Under Chapter 7	12/15
■ creditors hav ■ you have leas You must file thi whichever is ear	e claims secured by you sed personal property a s form with the court w lier, unless the court e	and the lease has not expir vithin 30 days after you file ktends the time for cause.	ed. your bankruptcy You must also ser	petition or by the date set for the meetind copies to the creditors and lessors you	•
•	eople are filing togethe ust sign and date the f	•	equally responsible	le for supplying correct information.	

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property secures a debt? as exempt on Schedule C? No. Creditor's Surrender the property. name: CRESCENT BANK AND TRUS Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Current Vehicle | Value: \$13,850.00 Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Surrender the property. No. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

Debtor	Mitchell Case 16-1401	.9 _E Doc 1	Filed 04/25/16 Document me Last Nam	Entered 04/25/16 1	4:43:38 r <i>(if</i>	Desc Main
1	First Name	Middle Nar	me Document Last Nam	Page 53 Of 71		
Part 2:	List Your Unexpired Pe	rsonal Prope	rty Leases			
informat		state leases. Une	xpired leases are leases			ficial Form 106G), fill in the ot yet ended. You may assume an
Des	cribe your unexpired person	al property lease	s		Will the lea	se be assumed?
Less	sor's name: Gen Realty				☐ No ✓ Yes	
	cription of leased erty: Landlord					
Less	sor's name:				No Yes	
Dese prop	cription of leased erty:					
Less	sor's name:				No Yes	
Dese	cription of leased erty:					
Less	sor's name:				No Yes	
Dese	cription of leased erty:					
Less	sor's name:				No Yes	
Dese prop	cription of leased erty:					
Less	sor's name:				No Yes	
Des	cription of leased erty:					
Less	sor's name:				No Yes	
Des	cription of leased erty:					
Part 3:	Sign Below					
Unde			cated my intention about	any property of my estate that	secures a de	bt and any personal property
X 10	s/ Mitchell Carbin			×		
	gnature of Debtor 1			Signature of Debtor 1		

Date 4/25/2016

MM/DD/YYYY

Date

MM/DD/YYYY

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Mitchell E Carbin		Case No.	
-	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE C	F COMPENSATION	N OF ATTORNEY FOR	DEBTOR
1.	compensation paid to me within	one year before the filing of the	rtify that I am the attorney for the ab petition in bankruptcy, or agreed to plation of or in connection w ith the b	be paid to me, for services
	For legal services, I have agree	d to accept		\$1,415.0
	Prior to the filing of this stateme	nt I have received		\$0.0
	Balance Due			\$1,415.0
2.	The source of the compensation	paid to me was:		
	/ Debtor	Other (specify)		
3.	The source of the compensation	paid to me is:		
	✓ Debtor	Other (specify)		
4.	I have not agreed to share to members and associates of		on with any other person unless the	/ are
		ny law firm. A copy of the agree	with a other person or persons who are ment, together with a list of the nar	
5.		_	egal service for all aspects of the bal advice to the debtor in determining	

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

	CERTIFICATION	
I certify that the foregoing is a complete so the debtor(s) in this bankruptcy proceedings.	tatement of any agreement or arrangement for payment to me for representation	on of
4/25/2016	/s/ Elizabeth Placek	

Signature of Attorney

Semrad Law Firm

Name of law firm

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Date

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Mitchell E Carbir		Case No.	
	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE (F COMPENSATION	OF ATTORNEY FOR	R DEBTOR
1.	compensation paid to me within	and Fed. Bankr. P. 2016(b), I certify one year before the filing of the pe shalf of the debtor(s) in contemplat	tition in bankruptcy, or agreed to	be paid to me, for services
	For legal services, I have agree	d to accept		\$1,415.0
	Prior to the filing of this statement	nt I have received		<u>/</u> \$0.0
	Balance Due			\$1,415.0
2.	The source of the compensation	paid to me was:		
	✓ Debtor	Other (specify)		
3.	The source of the compensation	paid to me is:		P
	✓ Debtor	Other (specify)	U.	**************************************
4.	I have not agreed to share t members and associates of	ne above-disclosed compensation may law firm.	with any other person unless the	y are
	I have agreed to share the a members or associates of n the people sharing in the con	bove-disclosed compensation with ny law firm. A copy of the agreeme npensation, is attached.	a other person or persons who a ent, together with a list of the nar	re not nes of
5.	In return for the above-disclosed a. Analysis of the debtor's fi bankruptcy;	fee, I have agreed to render legal nancial situation, and rendering ad	I service for all aspects of the ba vice to the debtor in determining	nkruptcy case, including: whether to file a petition in
	b. Preparation and filing of	any petition, schedules, statements	s of affairs and plan which may b	e required;
	c. Representation of the del	otor at the meeting of creditors and	confirmation hearing, and any ac	djourned hearings thereof;

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1415.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Initial: MC

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 4/25/2016	
Client <u>MU</u>	Client
Attorney (A)	Moul

Mitchell Carbin Matter Number 475076-001

nitial: <u>从</u>С

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
<u> </u>	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$310	total fee
+	\$75	administrative fee
	\$235	filing fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-14019 Doc 1 Filed 04/25/16 Entered 04/25/16 14:43:38 Desc Main UNITED STATES BANKBURGE OF POURT Northern District of Illinois

In re:	Carbin, Mitchell E Debtor(s)	Case No		
	Debiol(s)	Chapter.	Chapter7	
	VERIFICATIO	N OF CREDITOR MATE	RIX	
	The above named Debtors hereby verify that the a	ttached list of creditors is true ar	d correct to the best of their knowle	dge.
Date:	4/25/2016	/s/ Carbin, Mitchell I	<u> </u>	
		Carbin Mitchell F		

Signature of Debtor

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CRESCENT BANK AND TRUS 5401 JEFFERSON HWY STE D HARAHAN , LA 70123 USA

NATLCRSYS P.O. BOX 312125 ATLANTA , GA 31131 USA

CCI 501 Greene Street # 302 Augusta , GA 30901 USA

Peoples Gas 200 E. Randolph Chicago , IL 60601 USA

DVRA BILLING 2701 LOKER AV WEST CARLSBAD , CA 92008 USA

EAGLE ACNTS 7510 Old Madison Ave Indianapolis , IN 46227 USA

S C ELECTRIC & GAS I-26 COLUMBIA , SC 29218 USA

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606 USA

AMERASSIST AR SOLUTION 445 Hutchinson Ave #500 Columbus , OH 43235 USA

ILLINOIS COLLECTION SE 8231 185TH ST STE 100 TINLEY PARK, IL 60487 USA

Illinois Department of Employment Security 33 S State St 9th Floor Chicago , IL 60603 USA

Americash 555 Torrence Avenue Calumet City , IL 60409 USA Case 16-14019 Doc 1 Filed 04/25/16 Entered 04/25/16 14:43:38 Desc Main nancial Services, Inc. Document Page 65 of 71

PLS Financial Services, Inc. 920 South Western Ave Chicago , IL 60643 USA

University of Chicago Medicine 15965 Collections Center Dr Chicago , IL 60693 USA

Case 16-14019 Doc 1 Filed 04/25/16 Entered 04/25/16 14:43:38 Desc Main Document Debtor 1 Mitchell Page 66 of 71 Case number (if known) Last Name Part 6: Answer These Questions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are after any exempt paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? 18. How many creditors **1**-49 1,000-5,000 25,001-50,000 do you estimate that 50-99 5,001-10,000 50,001-100,000 you owe? 100-199 10,001-25,000 More than 100,000 200-999 19. How much do you **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion \$50,001-\$100,000 estimate your assets \$10,000,001-\$50 million \$1,000,000,001-\$10 billion to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion S500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion ^{20.} How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion \$50,001-\$100,000 estimate your \$10,000,001-\$50 million \$1,000,000,001-\$10 billion liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion S500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Ranz Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12,

or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptey case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ \52/1341, 1519, and 3571 ١

	33 (0.7)	1941, 1019, alta 3511.
e	V	
**	/s/ Mitchell Carbin	MIN
	Signature of Debtor 1	
	Executed on 4/25/20	16

MM / DD / YYYY

Signature of Debtor 2 Executed on . MM / DD / YYYY

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		Docu	ment Page 67 o	of 71	
Fill in this inform	nation to identify your cas	9			
Debtor 1	Mitchell	E	Carbin		
Debtor 2	First Name	Middle Name	Last Name	—	
(Spause, if filing	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	Northern	District of Illinois		
Case number (If known)			(State)		
	orm 106De	—			Check if this is an amended filing
Declarat	ion About ar	n Individual De	btor's Schedul	es	*****
If two married po	eople are filing togethe	, both are equally responsi	ble for supplying correct info	ormation	12/15
You must file thi	s form whenever you fi	e hanknintev echodulos on		g a false statement, concealing proper prisonment for up to 20 years, or both	rty, or obtaining money or . 18 U.S.C. §§ 152, 1341,
Parti: Sign	Below	341/04			
Did you pay	or agree to pay some	one who is NOT an attorney	to help you fill out bankrupto	CV forms?	
☑ No		-		, remo.	
☐ Yes. Na	ame of person		Attach Bankruptcy Petit Signature (Official Form	tion Preparer's Notice, Declaration, and n 119).	
Under pena that they are	Ity of penjury, I declare to true and correct.	hat I have read the summar	y and schedules filed with th	is declaration and	

Signature of Debtor 2

MM/DD/YYYY

Date

X /s/ Mitchell Carbin Signature of Debtor 1

Date 4/25/2016

MM/DØ/YYYY

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D-1		Document Page 68 of 71					
Deb	otor 1	Mitchelf	E	Carbin	Case number (if known)		
·		First Name	Middle Name	Last Name	Odse Humber (it known)		
28.	griminos:	nin 2 years befo litors, or other No Yes. Fill in the d		lid you give a financial	I statement to anyone about your business? Include all financial institutions,		
	XMP4ELLS			4.50			
				Date issued			
		Name					
		Name		MM/DD/YYYY			
		Number Stre	et				
		City	State Zip Coo	te			
			_,,				
Part	12:	Sign Below					
i a	have ind co pankri	uptcy case can	result in fines up to \$250,000	ncial Affairs and any at ement, concealing prop or imprisonment for u	attachments, and I declare under penalty of perjury that the answers are true operty, or obtaining money or property by fraud in connection with a up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.		
		Sigr	ature of Debtor 1	Name of the Control o	Signature of Debtor 2		
		51	/		Date		
		Date	4/25/2016/		- ****		
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?							
2***	ereg		The state men	O Financial Attairs 10	or Individuals Filing for Bankruptcy (Official Form 107)?		
2	∠ No)	/ \ \				
Γ	Ye	s	Ý				
	m/s/2						
D	id yo	u pay or agree t	o pay someone who is not ar	attorney to help you f	fill out bankruptcy forme?		
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?							
	⊈ No						
L.	Ye	s. Name of perso	on		Attach the Bankruptcy Petition Preparer's Notice,		
	·	P. Santonia, program (1980)			Declaration, and Signature (Official Form 119).		
			and the state of t	ere ere ere ere ere er er er er er er er	The organization (Omidian Omit 118).		

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1 First Name	A. (1.31 A.)	Carbin	Case number (if	
PRODUCTION OF THE PROPERTY OF	Middle Name	Last Name	known)	
ant 2: List Your Unexpired	Personal Property Lea	ises		
For any unexpired personal prop nformation below. Do not list rea unexpired personal property leas	erty lease that you listed in the state leases. Unexpired leases the state leases and asset if the trustee does not asset.	Schedule G: Executory Co ases are leases that are s sume it. 11 U.S.C. 6 365(n)	ontracts and Unexpired Leases (Official Form 106G), fill itill in effect; the lease period has not yet ended. You may	in the assume ar
	di kalinda da utaka ke kecamatan da pada d	3 000(p)	(a).	
Describe your unexpired per	sonal property leases		Will the lease be assumed?	
Lessor's name: Gen Realty	1000 1007 X 1500 100 APAN 100 100 100 100 100 100 100 100 100 10		□ No ✓ Yes	
Description of leased property: Landlord			Simula	
Lessor's name:			No Yes	
Description of leased property:			les	
Lessor's name:			No No	
Description of leased property:		e mana manana manan	Yes	
Lessor's name:		***************************************	No Yes	***************************************
Description of leased property:			Tes	
Lessor's name:			No Yes	· · · · · · · · · · · · · · · · · · ·
Description of leased property:		of the state of th	The state of the s	
Lessor's name:		en kalanta (k. 10 m) eta en k. 10 m matu ka 10 m m matu ka 10 m matu ka 10 m m matu ka 10 m m m matu ka 10 m m	☐ No ☐ Yes	The second second
Description of leased property:		e a marine e e e e e e e e e e e e e e e e e e		
Lessor's name:		en e	No Yes	e e e una como de desde e e empre syndrogen
Description of leased property:			163	
Sign Below	ka akika 1900-ka kamana akika sa kamana akika ayan ayan akika akika akika akika akika akika akika akika akika a	Transconduct actions of the enterprising and companies are the constraint of the con	rock men is a men nord a sum fold and lighting out public happy and modellights and a sum men in the property of the contract	t di salah da salah d
Inder penalty of perjury, declar hat is subject to an unexpired le	e that I have indicated my in	tention about any propert	y of my estate that secures a debt and any personal pro	perty
Signature of Debtor 1	<u>Ch</u>	*		
		Signatu	re of Debtor 1	
Date <u>4/25/2016</u> MM/DD/YYYY		Date	MM/DD/YYYY	

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Carbin, Mitchell E	-	_		
	Debtor(s)	Case No.			
		Chapter. Chapter7			
	VERIFIC	ATION OF CREDITOR MATRIX			
	The above named Debtors hereby verify th	at the attached list of creditors is true and correct to the best of	of their knowledge.		
Date:	4/25/2016	/s/ Carbin, Mitchell E			
		Carbin, Mitchell E	4000456		
		Signature of Debtor			
		/ '			

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Debtor 1	Mitchell First Name	E Middle Nama	Carbin	Case number (if known))
	That reme	wadde Naile	Last Name	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
Do no	ployment compensation t enter the amount if you contend th I Security Act. Instead, list it here:	at the amount receiv	red was a benefit under th	\$ <u>0.00</u>	
-	Company Company Company		\$0.00		
	our spouse on or retirement income. Do not		\$0.00	***	
benefi	t under the Social Security Act.	-		\$ <u>0.00</u>	With the training of the second secon
receiv	ne from all other sources not lit tinclude any benefits received unde ed as a victim of a war crime, a crin stic terrorism. If necessary, list othe słow.	er the Social Securit ne against bumanin	y Act or payments		
************					The state of the s
Total a	mounts from separate pages, if any	y.		+\$0.00	*
11. Calc	ulate your total current monthly mn. Then add the total for Column	income. Add lines A to the total for Col	2 through 10 for each umn B.	\$2,205.20	= \$2,205.20 Total current
Part 2:	Determine Whether the Me	eans Test Appli	es to You		monthly income
	late your current monthly incorr	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.			
	opy your total current monthly incor		ř	Copy	line 11 here → \$2,205.20
٨	fultiply by 12 (the number of month	s in a year).		And the second of the second o	X 12
12b. T	ne result is your annual income for	this part of the form			12b. \$26,462,40
					Same of the same o
13 Calcul	ate the median family income th	at applies to you.	Follow these steps:		
Fill in t	ne state in which you live.		Illinois		
Fill in th	ne number of people in your housel	hold.	erment of the derivative for the control to be be a finite property of the control of the contro		
Fill in th	ne median family income for your si	tate and size of hous	sehold.		13. \$49,741.00
instruct	a list of applicable median income ions for this form. This list may also	amounts, go online be available at the	using the link specified in bankruptcy clerk's office.	the separate	
	o the lines compare?				
14a. 🗸	Go to Part 3.			•	
14b.	Line 12b is more than line 13. Or Go to Part 3 and fill out Form 12	the top of page 1, o 2A-2.	heck box 2, The presump	tion of abuse is determined by Form	n 122A-2.
Parts: S	Sign Below				
By sig	ning here, I declare under penalty of	of perjury that the inf	ormation on this statemer	at and in any attachments is true an	d correct.
-	s/ Mitchell Carbin		Name of the State		
Sig	gnature of Debtor 1/			Signature of Debtor 2	
Da	ite 4/25/2016			Date 4/25/2016	
	MM/DD/YYYY			MM/DD/YYYY	
lf yo If yo	u checked line 14a, do NOT fill out u checked line 14b, fill out Form 12	or file Form 122A-2 2A-2 and file it with	this form.		